

2010 ELECTION CYCLE

Political Committee
REPORT OF RECEIPTS AND DISBURSEMENTS
2010 Judicial Election

Delbert Hosemann
SECRETARY OF STATE

Name of Committee Committee to Elect Chris D. Harris
Address P.O. Box 203, Raleigh, MS 39153
Telephone (601) 764-7395 Fax (601) 782-4219
Treasurer Jeff Tullas Email jtullas@bellsouth.net



☐ Check here if above is different from previous report

TYPE OF REPORT

☐ May 10, 2010 Periodic Report (January 1, 2010, through April 30, 2010).....Mandatory
☐ June 10, 2010 Periodic Report (May 1, 2010, through May 31, 2010).....Mandatory
☐ July 9, 2010 Periodic Report (June 1, 2010, through June 30, 2010).....Mandatory
☐ October 8, 2010 Periodic Report (July 1, 2010, through September 30, 2010).....Mandatory
☒ October 26, 2010 Pre-Election Report (October 1, 2010, through October 23, 2010).....Mandatory
☐ November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010).....Runoff Candidates
☐ January 10, 2011 Periodic Report (October 1, 2010, through December 31, 2010).....Mandatory
☐ Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligation) Required to terminate reporting obligations

IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- (2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized + Non-itemized =	This Period	Calendar Year-To-Date
Total amount of contributions	\$1,085.00 + \$299.00	\$1,384.00	\$2,384.00
Total amount of disbursements	\$1,986.86	\$1,986.86	\$1,986.86
Total amount of cash on hand		\$397.14	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Signature of Director or Treasurer

Date

10/26/2010

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P. O. Box 135, Jackson, MS 39205 or fax to 601-369-1499 or 601-576-2019.
2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

Page 1 of 1Name of Candidate or Committee Committee to Elect Chris D. HennisReporting period 10/1/2010 through 10/23/2010

ITEMIZED RECEIPTS

A. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Paul Garner Motors, LLC</u>		<u>10/21/10</u>	\$ <u>250.00</u>
Mailing Address <u>P.O. Box 277</u>		<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code <u>Raleigh, Ms 39153</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Name of Employer (Required) <u>Self-Employed</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Occupation (Required) <u>Car Dealership</u>		Aggregate year-to-date	\$ <u>250.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Terrell Stubbs</u>		<u>10/15/10</u>	\$ <u>535.00</u>
Mailing Address <u>P.O. Box 157</u>		<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code <u>Mendenhall, Ms 39114</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Name of Employer (Required) <u>Self-Employed</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$ <u>535.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Ray Rogers</u>		<u>10/15/10</u>	\$ <u>300.00</u>
Mailing Address <u>P.O. Box 446</u>		<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code <u>Bay Springs, Ms 39422</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Name of Employer (Required) <u>Self Employed</u>		<u>1</u> <u>1</u> <u>1</u>	\$
Occupation (Required) <u>Insurance Agent</u>		Aggregate year-to-date	\$ <u>300.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name		<u>1</u> <u>1</u> <u>1</u>	\$
Mailing Address		<u>1</u> <u>1</u> <u>1</u>	\$
City, State, Zip Code		<u>1</u> <u>1</u> <u>1</u>	\$
Name of Employer (Required)		<u>1</u> <u>1</u> <u>1</u>	\$
Occupation (Required)		Aggregate year-to-date	\$

Name of Candidate or Committee Committee to Elect Chris D. Hewitt
 Reporting period 10/1/2010 through 10/23/2010

ITEMIZED DISBURSEMENTS

A. Full name <u>Sign Here</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>507 North West St, P.O. Box 583</u>	<u>10/15/10</u>	\$ <u>535.00</u>
City, State, Zip Code <u>Mendenhall, MS 39114</u>	<u>10/15/10</u>	\$
Purpose of Disbursement (Optional) <u>Signs</u>	Aggregate Year-to-date	\$ <u>535.00</u>
B. Full name <u>The Post</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>P.O. Box 100</u>	<u>10/17/10</u>	\$ <u>125.00</u>
City, State, Zip Code <u>Taylorville, MS 39168</u>	<u>10/17/10</u>	\$
Purpose of Disbursement (Optional) <u>Announcement</u>	Aggregate Year-to-date	\$ <u>125.00</u>
C. Full name <u>News Commercial</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>P.O. Box 1299</u>	<u>10/13/10</u>	\$ <u>140.00</u>
City, State, Zip Code <u>Collins, MS 39428</u>	<u>10/13/10</u>	\$
Purpose of Disbursement (Optional) <u>Announcement</u>	Aggregate Year-to-date	\$ <u>140.00</u>
D. Full name <u>Impact Printing & Design</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>3362 Hwy 15 N</u>	<u>10/13/10</u>	\$ <u>211.86</u>
City, State, Zip Code <u>Bay Springs, MS 39422</u>	<u>10/13/10</u>	\$
Purpose of Disbursement (Optional) <u>Cards</u>	Aggregate Year-to-date	\$ <u>211.86</u>
E. Full name <u>The Magee Courier / Simpson County News</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>P.O. Box 338</u>	<u>10/13/10</u>	\$ <u>250.00</u>
City, State, Zip Code <u>Magee, MS 39111</u>	<u>10/22/10</u>	\$ <u>300.00</u>
Purpose of Disbursement (Optional) <u>Announcement / Ads</u>	Aggregate Year-to-date	\$ <u>550.00</u>
F. Full name <u>Smith County Reformer</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>P.O. Box 187</u>	<u>10/15/10</u>	\$ <u>125.00</u>
City, State, Zip Code <u>Religh, MS 39153</u>	<u>10/15/10</u>	\$
Purpose of Disbursement (Optional) <u>Announcement / Ads</u>	Aggregate Year-to-date	\$ <u>125.00</u>

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Name of Candidate or Committee Committee to Elect Chris D. Harris
 Reporting period 10/1/2010 - 10/23/20 through 10/23/2010

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Jasper County News</u>	<u>10/19/10</u>	\$ <u>125.00</u>
Mailing Address		
<u>P.O. Box 449</u>	<u>10/19/10</u>	\$ <u>125.00</u>
City, State, Zip Code		
<u>Bay Springs, MS 39422</u>	<u>10/19/10</u>	\$ <u>125.00</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>125.00</u>
<u>Announcement Ads</u>		
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Simpson County Impact</u>	<u>10/22/10</u>	\$ <u>175.00</u>
Mailing Address		
<u>6335 U.S. Hwy 49, Ste. 20</u>	<u>10/22/10</u>	\$ <u>175.00</u>
City, State, Zip Code		
<u>Hittisburg, MS 39401</u>	<u>10/22/10</u>	\$ <u>175.00</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>175.00</u>
<u>Announcement Ads</u>		
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
		\$
Mailing Address		\$
		\$
City, State, Zip Code		\$
		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
		\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
		\$
Mailing Address		\$
		\$
City, State, Zip Code		\$
		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
		\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
		\$
Mailing Address		\$
		\$
City, State, Zip Code		\$
		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
		\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
		\$
Mailing Address		\$
		\$
City, State, Zip Code		\$
		\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
		\$